FOR INSTRUCTIONS, SEE BACK OF FORM	Rescuire		FORM	
DISCLOSURE SUMMARY PAG			<b>DR-2</b> Rev. <u>0</u> 5/2002)	DISCLOSURE REPORT
COMMITTEE NAME (Must be same as on Statement of Organic County Dem	anization) O'CYatic Cen	+ 1 4 4 1 FC	or Office Use C	m 1 11 CC
IMPORTANT: Indicate type of committee you are reporting for:	]	Co	omm. #	4147
(1)Statewide/Legislative Candidate (2)Statewide PAC (3)State Party (5)County PAC (6)Ballot Issue/Franchise Committee (7)County/City (8)Support State of Candidates	( 4 )County/Local Candidate Central Committee	Aı	udited omputer	
CANDIDATE COMMITTEES ONLY:				- PM ]
Candidate Name	Political Party	-		
		-		
Office Sought, Jophnes	District (if Senate or House	e) -		
Polar Hali	711-541	-1534	e L	12/08
SIGNATURE OF TREASURER (or person filing this report		192		SIGNED
Routine Penalties Due For Lat	e Filed Reports Range	from \$2	0 to \$800	
SEE INSTRUCTIONS ON BACK AND COMPLETE TH				
IAMFILINGA Nonelection year				CTION YEAR.
(report date)	lı	ndicate on	e [3]	
□CHECK IF AMENDMENT TO REPORT DATED		Local Cor	nmittees, enter	Date of Election
Check if this is final (termination) report and attach Notice (You must continue to file reports until a Notice of Di	of Dissolution Form DR-3.	County & which Ele	Local Committ ection is held	ees, enter County in
(You must continue to the reports until a reduce of Di	ssolution is mea.	$\rho_{\alpha}$	ege_	
STATEMEN	T OF CASH ON HAND			
CASH ON HAND at the beginning of the reporting period. (T by the committee. This amount MUST be the same of the last reporting period, or must be zero if this is	as the cash on hand at the er	ıd	4	46.08
ADD TOTAL MONEY TAKEN IN THIS PERIOD			71	1// . 7
Schedule A: Cash Contributions total (Attach Schedule A: Cash Contributions total A: Cash Contributions total (Attach Schedule A: Cash Contributions total A: Cash Contributions total (Attach Schedule A: Cash Contributions total A: Cash Contribution	dule A) (*also see in-kind belo	w)	31	14.01
Schedule F: Loans Received total (Attach Schedule	e F)			
Schedule H: Total Sales of Campaign Property (Att	ach Schedule H)			
(Schedule H applies to Candidates' Com	mittees Only)			
	SUB-TO	TAL\$	35	63.06
SUBTRACT TOTAL MONEY SPENT THIS PERIOD			) <i>L</i> I	וור מג
Schedule B: Expenditures total (Attach Schedule B				04.4
Schedule F: Loan Repayments total (Attach Sched	ule F)			
CASH ON HAND at the end of this reporting period (if final re	eport, balance must	rt.	21	58.35
be zero) (Attach DR-3)		Ф		7, 9, 1, 2,
**UNPAID BILLS (From Schedule D - Attach Schedule D)				
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Sch	edule E)	\$		
**OUTSTANDING LOANS (From Schedule F - Attach Sched	iule F)	\$		
CANDIDATE COMMITTEES ONLY:				•
			<del></del> 1	<del> </del>
CONSULTANT BREAKDOWN (Schedule G Attached?)		9		YES NO

For Instructions, See Back of Form

# CONTRIBUTIONS - MONEY TAKEN IN

CONTRIBUTIONS - MICHAEL Sergonal funds)	
CONTRIBUTIONS CONTRIBUTIONS	· Hogs
COMMITTEE NAME (Must be same as on S	atic Central Committee
COMMITTEE NAME (MUSICE STATE	L'a Contra Commillet
D. a County Democr	ariccen
Tage Court	THE BAC POLITICAL ACTION C

SCHEDULE	MCNETARY RECEIPTS
☐ CHE	ECK THIS BOX IF

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION AND CAMBRIDATES AND THE BAC CHEET, METABLED IN THE DECIDANTED COLUMN. A LIST OF ID METABLED IN AND THE BAC CHEET, METABLED IN THE DECIDANTED COLUMN. PLATE CAMBULATES NUTTE IF A CONTRIBUTION IS HELEVED FHOM A STATE PAC (PULLTICAL ACTION COMMITTIES), CONTRIBUTION IS HELEVED FHOM A STATE PAC (PULLTICAL ACTION COMMITTIES), CONTRIBUTION AND CAMPAIGN NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLLIMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE POLICY.

CAUTION: Section 68B.32A(6), lows Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

ONITION: Section	on 68B.32A(6), lowa Cod	le, pronintis the use of political committees.			V IF FOR
for any commerci	al purpose by any person	nother than statutory political committees.	RELATIONSHIP		FUND-
(C) Carry		MAME AND ADDRESS OF CONTRIBUTOR	TO CANDIDATE"	RECEIVED	RAISER
DATE	PAC ID NUMBER	STM Tenorm A TO TO	(if applicable)		INCOME
RECEIVED	(if applicable) AND PAC CHECK	m. JA Heininger			
(MM/DD/YF)	NUMBER	MaxA Heininger 8641 N Chathom Ave		\$	
	ID#	8641 N Charm		100	
3/15				1 100	
	CX#	Hensascity, Mo.		1	
10/9		Nanic Cale			
A COLUMN TO A COLU	ID#			175	
,	CK#	c/6xinda, Ta 5/632		-	
10/9	CRar	C/64/11/14		1	1
	ID#	Dave Nochest.		1110	
•		MAIN W. STEPES		120	
10/0	CK#	Clevinda 12 4 5/62			
10/9	11714	Robert Reeper Robert Heeper			
•	ID#	315 N/6 St		100	
10/9	CK#				T
10/4		Hackins.		340	1
	ID#	Gay/ They wood Cour	<b>~</b>   .	3/6	
	OICH	220 7.04t T ~ 1/32			-
10/9	CK#	Clasinda, Lugin		\	
10/1	ID#	Gayl Hofkins 220 Tower wood Cour 220 Tower wood Cour Clesinda, I a 5/632  Anthony Jagu 400 East Logan Clexinda I a 5/63  James Bradley 2769, 2,0534		95	
	1124	LIND East Logen -1/3		1/	
1./-	CK#	Clevinda Iu 3/63	4		
10/9		Tomas Bradley		100	
-	ID#	2769 205 St	·		1
10/9	CX#	1 vindo Ta 5/6:	32		
10/9		Crest Harrin	g for		
	1D#	Jenny	<b>y</b>	90	1
· la		Jennifer Herrin 619 Wildthet 619 Wildthet	27		
10/4	CK#	Clavinda, Ie516	2		
***************************************	ITAL	Kenneth Pulsley 2024 300thst 2024 Tu 5/63			_
,	ID#	1024 300th8x	1	135	
10/4	CK#		0		
10/7		Tom williams			
		10M 6012 mil 8 ×		100	<b>&gt;</b>
10/9	OV.	70M Williams 2876, 102 md 5x Villisca, I e 50864	·		
10/9	CK#	VIIII SCR IZ	SUB-TOTAL	\$ /355	
		το	TAL (If last page of	this	1
			ached	ule) \$	

achedule)

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Fleiationship must be shown to the third degree of consunguinity (blood relatives) and affinity (relatives by narriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no amilial relationship, enter "not applicable" in the relationship column.

(for Schedule A)

For Instructions, See Back of Form

### CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal lunds)	☐ CHECK THIS BOX (F
COMMITTEE NAME (Must be same as on Statement of Organization)	AMENDING FORM
Page County Democratic Central Committee	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT RECEIVED	VIFFOR
RECEIVED	(if applicable)		TO CANDIDATE* (if applicable)	MECEIVED	RAISER
(MM/DD/YR)	AND PAC CHECK NUMBER				INCOME
	ID#	Ruth Garrell		\$	
, /	CK#	711 N 144 85		150	
10/9	CR#	Clerinda Lu 5/632		1	
	ID#	is la tribut	ions	1379.0	7
Verious	CK#	Ruth Garrell 711 N 14th st Clerinda Lu 5/132 un itemized contribut		107750	
	ID#	. "11." 12 m c			
10/9	CK#	Devendet a socia		90	
	ID#	<del></del>		_	
	CX#			·	
	ID#				
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	iD#	·			
	CK#	·			
	ID#				
	CK#				
***************************************	ID#				
	CK#		·		
			SUB-TOTAL	16190	4フ

TOTAL (if last page of this

SCHEDULE

Æ

(Rev. 06/97)

MONETARY RECEIPTS

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consariguinity (blood relatives) and affinity (relatives by narriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no amilial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM



# **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES		
CHECK THIS BOX IF			

ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization) nemocratic centual

1 Den	noc	1110		M11/176	AMOUNT
DATE EXPENDED (MM/DD/YR)	CANDIE ID NUM (if applic AND F	BER able)	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	EXPENDED
(3/3/	CHEC	CK /			
36/30	ID# CK#		Bank Toway 101 NIGHSY Cleviade IL 4 5/63	Bank Charges 2 Three Times 2 Toffil. 07	\$ 3.21
6/20	ID#	725	Page Co Feir Doe	Feir Booth	45,00
7/14	ID#	726	Dennis Cole Try Clert st Clarinda, I a 5/632	l	98,20
9/11/0	ID# CK#	727	Denniscole 7/4 Clerkst Clerinda, In 5/632	reiser.	114.65
ich	ID# CK#	728	12005 16+1 34 Clevinda, Ju 5/132	Food For Fund Ruiser	604.82
10/6	ID# CK#	729	Tom Ives 2/4/2 Eminst Clayinda, Tur163	Entain Ment For Fund Ruiser	100,00
10/9	ID#	73#	Bayh Chambers 2487, 130+157 Clayinda II a 5/4	Decovation For FundRaiser	40,07
10/6	ID#	730	Clavinda Country ( 1400 N/6+h st Clavinda Tu 5/6	By For Fund Paisor	180,00
				305-1017	11 000
				TOTAL (if last page of this schedule	り \$ <del>11 \$3, 75</del>

# THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

	4		-1
Page		of	



#### **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES		
CHECK THIS BOX IF AMENDING FORM			

COMMITTEE NAME (Must be same as on Statement of Organization) CANDIDATE NAME AND ADDRESS TO WHOM PURPOSE **AMOUNT** DATE ID NUMBER **EXPENDITURE** (DESCRIBE TRANSACTION) **EXPENDED EXPENDED** (if applicable) (Disbursement) WAS MADE (MM/DD/YR) AND PAC CHECK NUMBER Carter Printing Ticket Printing ID# Fund vaisor Robert Williams Books For Silent ID# 2487 130thst CK# lexinds, I4 51637 Kath Iven Neefer 315 W19th St ID# Snocks For Fund reisor CK# Clevinda, In 51632 Jennifer Herrington Poster Plinting For Fund raiser ID# CK# Towa Steek Fry 63.66 Checking Service Charge, 07 ID# CK# 736 clayinda, Ia Bank Ia. CK# ciavinda, I4 5/632 ID# CK# ID# CK#

TOTAL (if last page of this schedule)

\$14 04. 24

#### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page \_\_\_\_\_\_ of \_\_\_\_\_\_

SUB-TOTAL